COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL031212 US

As a below named inventor, I h	ereby declare that:		
My residence, post office addre	ess and citizenship are as state	ed next to my name.	
		name is listed below) or an original, firs claimed and for which a patent is soug	
the specification of which (chec	ck only one item below):		
is attached hereto.			
was filed as United States a	pplication		
Serial No			
on			
and was amended			
on			
x was filed as PCT internation	nal application		
Number PCT/IB2004/05106	7		
on30 June 2004			
and was amended under PCT	Article 19		
on			(if applicable).
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	n, including the
I acknowledge the duty to disclewith Title 37, Code of Federal F		erial to the examination of this application	on in accordance
or inventor's certificate or of any States of America listed below any PCT international application	y PCT international applicatior and have identified below any on(s) designating at least one	States Code, § 119 of any foreign applin(s) designating at least one country of foreign application(s) for patent or invector than the United States of the application(s) of which priority is clean	her than the United entor's certificate or f America filed by me
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:	
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03102143.9	14 July 2003	YES
Europe	03103830.0	16 October 2003	YES
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Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL031212 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

	FULL NAME OF INVENTOR	FAMILY NAME COENE	FIRST GIVEN NAME Willem	SECOND GIVEN NAME Marie Julia Marcel
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Belgium
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holsitaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME BERGMANS	FIRST GIVEN NAME Johannes	SECOND GIVEN NAME Wilhelmus Maria
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Lichtenberg 62	5655 BH Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
•	FULL NAME OF INVENTOR	FAMILY NAME IMMINK	FIRST GIVEN NAME Albert	SECOND GIVEN NAME Hendrik Jan
203	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Hoistlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME BUSCH	FIRST GIVEN NAME Christopher	SECOND GIVEN NAME
204	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME VAN DER LEE	FIRST GIVEN NAME Alexander	SECOND GIVEN NAME Marc
205	RESIDENCE & CITIZENSHIP	Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME HEKSTRA	FIRST GIVEN NAME Andries	SECOND GIVEN NAME Pieter
206	RESIDENCE & CITIZENSHIP	CITY Eindhoven	The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF INVENTOR	SPRUIJT	FIRST GIVEN NAME Aloysius	SECOND GIVEN NAME Michael Josephus Maria
207	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Hoistlaan 6	5656 AA Eindhoven	STATE & ZIP CODE COUNTRY The Netherlands

Combined Declaration For Patent Application and Power of Attorney (Continued) includes Reference to PCT International Applications)			Attorneys Docket Number PHNL031212 US	
	FULL NAME OF INVENTOR	FAMILY NAME DE RUIJTER	FIRST GIVEN NAME Johannes	SECOND GIVEN NAME Martinus
208	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
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DATE 03 February 2005	DATE ^V 03 February 2005	03 February 2005
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	03 February 2005 SIGNATURE OF INVENTOR 206
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DATE 03 February 2005	DATE 03 February 2005	DATE 03 February 2005
SIGNATURE OF INVENTOR 207	SIGNATURE OF INVENTOR 208	
DATE	DATE	
	ı	_1

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL031212 US

As a below named inventor, I	hereby declare that:			
My residence, post office addr	ess and citizenship are as sta	ted next to my name.		
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled				
the specification of which (che	ck only one item below):			
is attached hereto.				
was filed as United States	application			
Serial No				
on				
and was amended				
on				
was filed as PCT internation Windows				
202/ 22200 1/ 03200	0/			
on <u>30 June 2004</u>				
and was amended under PCT	Article 19			
on			(if applicable).	
claims, as amended by any am I acknowledge the duty to discl with Title 37, Code of Federal F I hereby claim foreign priority b or inventor's certificate or of an States of America listed below any PCT international application	nendment referred to above. Tose information, which is mate a segulations, § 1.56(a). The enefits under Title 35, United by PCT international application and have identified below anyon(s) designating at least one	ents of the above-identified specification erial to the examination of this applicate. States Code, § 119 of any foreign application at least one country of foreign application(s) for patent or invited states of the application(s) of which priority is of the application(s) of which priority is country or the states of the application(s) of which priority is constructed.	ion in accordance lication(s) for patent ther than the United rentor's certificate or of America filed by me	
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U.S.C. 119:		
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
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Attorneys Docket Number PHNL031212 US

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	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	COENE	Willem	Marie Julia Marcel
201	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven	The Netherlands	Belgium
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. HolsItaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	BERGMANS	Johannes	Wilhelmus Maria
202	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
202	CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Lichtenberg 62	5655 BH Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	IMMINK	Albert	Hendrik Jan
203	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	BUSCH	Christopher	
204	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven	The Netherlands	Germany
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	VAN DER LEE	Alexander	Marc
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	CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstiaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	HEKSTRA	Andries	Pieter
206	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	INVENTOR	SPRUIJT	Aloysius	Michael Josephus
	DECIDENCE	CITY	STATE OF FOREIGN COUNTRY	Maria COUNTRY OF CITIZENSHIP
207	RESIDENCE & CITIZENSHIP	Eindhoven	The Netherlands	The Netherlands
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE COUNTRY
	ADDRESS	Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)					Attorneys Docket Number PHNL031212 US	
	FULL NAME OF INVENTOR	FAMILY NAME DE RUIJTER	<u> </u>	FIRST GIVEN NAME Johannes		SECOND GIVEN NAME Martinus
208	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN OF The Netherland		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADD Prof. Holstla		5656 AA Eindh	oven	STATE & ZIP CODE COUNTRY The Netherlands
ue: an opriso oplicat	d further that these s	statements were made er section 1001 if Title suing thereon.	e with the knowledge	e that willful false statemen tes Code, and that such wi	ts and the like so liful false statem	information and belief are believed to be made are punishable by fine or ents may jeopardize the validity of the ATURE OF INVENTOR 203
DATE SIGNATURE OF INVENTOR 204				SIGNA	SIGNATURE OF INVENTOR 206	
DATE			DATE		DATE	
IGNA ⁻	TURE OF INVENTO	R 207	SIGNATURE OF	INVENTOR 208		

04 February 2005

04 February 2005

PTO/SB/80 (11-04)

Approved for use through 11/30/2005. OMB 0651-0035

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

6 6 6 6 6

I here	eby revoke all (FR 3.73(b).	previous powers of attorney	given in the applic	ation identified	in the attached state	ement under
	by appoint:					
	Practitioners asso	ociated with the Customer Number:	247	37		
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ָּ עו	Practitioner(s) nar	med below (if more than ten patent	practitioners are to be	named, then a cus	stomer number must be us	sed):
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						Number
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as attor	rnev(s) or agent(s) to represent the undersigned before	the United States B	-44		
		ations assigned only to the undersigned belo accordance with 37 CFR 3.73(b).	gned according to the t	atent and Tradema JSPTO assignmer	ark Office (USPTO) in con nt records or assignment o	nection with locuments
Please	change the corres	spondence address for the applicat	lion identified in the atta	iched statement u	nder 37 CFR 3.73(b) to:	
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OR	Firm or	T				
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miea in	each applicati	ion in which this form is used	1. The statement w	ndar 37 CED 3 7	73/h) may be complete	nd hwd
uie pra	icuuoners appo	ointed in this form if the appo application in which this Pov	ointed practitioner i	s authorized to	act on behalf of the a	ıssignee,
			TURE of Assignee of F			•
	The	dividual whose signature and title	is supplied below is au	thorized to act on	behalf of the assignee	
Signatur	'e ////	May E. Hh	un		Date 14 Januar	y 2005
Name	Michae				Telephone (914)	33-9637
Title	Author	rized Representat	ive			

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IAP15 Rec'd PGT/PTO 12 JAN 2006

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<u>STATEME</u>	NT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Koninklijke Philips Electronics N.	V
Application No./Patent No.: Concurrently	Filed/Issue Date: Concurrently
Entitled: METHOD AND DEVICE FOR DETERMINING WRITE	PARAMETERS FOR RECORDING INFORMATION ON A RECORD CARRIER
Koninklijke Philips Electronics N.V. , (Name of Assignee)	corporation (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is: 1. The assignee of the entire right, title, and interest	t; or
2. an assignee of less than the entire right, title and The extent (by percentage) of its ownership inte in the patent application/patent identified above by virt	rest is ———— %
A. [/] An assignment from the inventor(s) of the paten in the United States Patent and Trademark Office attached.	at application/patent identified above. The assignment was recorded e at Reel, Frame, or for which a copy thereof is
OR	
B. [] A chain of title from the inventor(s), of the patent below:	application/patent identified above, to the current assignee as shown
The document was recorded in the Unite	d States Patent and Trademark Office at, or for which a copy thereof is attached.
2. From:	To:
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[] Additional documents in the chain of title	are listed on a supplemental sheet.
[] Copies of assignments or other documents in the [NOTE: A separate copy (i.e., the original assignment be submitted to Assignment Division in accordance of the USPTO. See MPER	nent document or a true copy of the original document) ordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below) is aut	horized to act on behalf of the assignee.
1/11/06	Michael E. Belk, Reg. 33,357
Date (914) 333-9643	Typed or printed name
Telephone number	Signature Signature
·	Corporate Counsel Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.